

Introduction to Morbidity Trend Graphs

This supplement to the 2000 HIV Epidemic Profile provides a summary of the number of cases and case rates for: living AIDS cases, AIDS cases, HIV positives determined through counseling and testing (CTS), gonorrhea, chlamydia, and primary and secondary syphilis. All variables are calculated using the same protocols used in the Epidemic Profile and are therefore directly comparable to the incident data provided.

Case Information:

Living AIDS Cases. Includes individuals living on January 1 of the year of interest and have been diagnosed with AIDS prior to midnight on December 31 of the year of interest. This indicates the number of individuals in your planning area living with AIDS at any time during the year.

AIDS Cases. Includes any individual diagnosed with AIDS during year of interest.

CTS Positives. Includes any individual testing HIV positive during the year of interest.

Gonorrhea Cases. Includes the number of cases of gonorrhea reported during the year of interest.

Chlamydia Cases. Includes the number of cases of chlamydia reported during the year of interest.

Primary & Secondary Syphilis Cases. Includes the number of cases of primary or secondary syphilis reported during the year of interest.

Rate of Infection Information:

Living AIDS Case Rates. The number of individuals living on January 1 of the year of interest and have been diagnosed with AIDS prior to midnight on December 31 of the year of interest divided by the total population for each specified category (sex, age group, BDTP, race/ethnicity) in each specified year. This information is presented as the number of living AIDS cases per 100,000 people per year. Note: This is not AIDS prevalence since it does not count the number of individuals who have died with AIDS prior to the year.

AIDS Case Rates. This is also referred to as AIDS incidence. The number of individuals diagnosed with AIDS divided by the total population for each specified category (sex, age group, BDTP, race/ethnicity) in each specified year. This information is presented as the number of AIDS cases per 100,000 people per year.

CTS Positive Rates. This is CTS Positives incidence. The number of individuals testing positive through public sector CTS testing divided by the total population for each

specified category (sex, age group, BDTP, race/ethnicity) in each specified year. This information is presented as the number of CTS positives per 100,000 people per year.

Gonorrhea Case Rate. This is also referred to as gonorrhea incidence. The number of individuals reported with gonorrhea divided by the total population for each specified category (sex, age group, BDTP, race/ethnicity) in each specified year. This information is presented as the number of gonorrhea cases per 100,000 people per year.

Chlamydia Case Rate. This is also referred to as chlamydia incidence. The number of individuals reported with chlamydia divided by the total population for each specified category (sex, age group, BDTP, race/ethnicity) in each specified year. This information is presented as the number of chlamydia cases per 100,000 people per year.

Primary & Secondary Syphilis Case Rate. This is also referred to as primary & secondary syphilis incidence. The number of individuals reported with primary and secondary syphilis divided by the total population for each specified category (sex, age group, BDTP, race/ethnicity) in each specified year. This information is presented as the number of primary & secondary syphilis cases per 100,000 people per year.

General Considerations when looking at graphs.

- These graphs are presented to provide you with the general trend (increases or decreases) in cases and case rates over time.
- Do not over interpret. A change in the number of cases or rates that occur in only one year should not be interpreted as significant, but should be looked at in terms of overall trends.
- For case graphs, note the size of the unknown or undetermined category. If this category is large, it may “cover-up” the actual trends for some sub-populations.
- Keep in mind milestones in HIV/STD surveillance and changes in prevention and services over time.
 - The 1993 Change in definition of AIDS may affect Living AIDS and AIDS cases
 - Implementation of community planning in 1995
 - Use of STD*MIS to report STD information (more accurate reporting) began in late 1998.
 - Implementation of named reporting in 1999